

17374 U.S. PTO  
07/18/03

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	0090096
First Inventor	Fabian Haischmann
Title	Device for Rinsing a Body Cavity
Express Mail Label No.	EV322684971US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450
<input checked="" type="checkbox"/> Applicant claim small entity status. See 37 CFR 1.27 <input checked="" type="checkbox"/> Specification [14] Total Pages <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [2] Total Sheets <input checked="" type="checkbox"/> Suggested drawing figure to be published: Fig. [1] <input type="checkbox"/> Oath and Declaration [ ] Total Pages <input type="checkbox"/> Newly executed (original or copy) <input type="checkbox"/> Copy from prior application (37 CFR 1.63 (d)) <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO SB 8A <input type="checkbox"/> Copies of cited references	<input type="checkbox"/> Assignment Papers (cover sheet & document(s)) <b>Assignee Information</b> Name <u>W.O.M. World of Medicine AG</u> Address <u>Berlin, Germany</u> <input type="checkbox"/> Nonpublication Request Under 35 USC 122(b)(2)(B)(i) <input type="checkbox"/> Preliminary Amendment <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) This application claims priority to German application DE 102 33 053.0-35, filed July 19, 2002, the contents of which are incorporated herein by reference. <input type="checkbox"/>

If a CONTINUING APPLICATION check appropriate box

☐ Continuation    ☐ Divisional    ☐ Continuation-in-part (CIP)    Prior Application No. \_\_\_\_\_  
 Prior application information    Examiner \_\_\_\_\_ Art Unit \_\_\_\_\_

**For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**

**CLAIMS AS FILED**

	No. Filed	No. Extra	Rate	Fee
Total Claims				
Independent Claims				
Assignment Recording Fee				
Basic Filing Fee				
<b>TOTAL FILING FEE</b>				

☒ NO FEE AND NO AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT.  
☐ The Commissioner is authorized to charge or credit any discrepancies in the fee amount to Deposit Account: \_\_\_\_\_

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